

BRANCH OFFICE (ERNAKULAM)  
EMPLOYEES' STATE INSURANCE CORPORATION,  
ESI HOSPITAL COMPLEX, ERNAKULAM -682018

The IMO,ESI dispensary.....

Dear Doctor,

Ref: Certificate No ..... Dated ..... Issued by you

Shri/Smt ..... Ins. No .....

Kindly refer to your above mentioned certificate. There is a discrepancy as per the query No..... given bellow:

1. Certificate is written in lead pencil. It should be written in ink or indelible copying pencil.
2. The date of first certificate is not mentioned. Please indicate the date of first certificate. This may please be indicated in all subsequent certificates in future.
3. The date of examination of the insured person is ..... Whereas the date of issue of the certificate is ..... The certificate cannot be ante-dated or post-dated except that it may cover the incapacity to the extent of 24 hours prior to the date of examination, if you are satisfied.
4. First/Intermediate/Final Certificates have been issued though incapacity in the present spell is less than 28 days.
5. Special Intermediate certificate has been issued though incapacity in the present spell is less than 28 days.
6. The additional remarks are not attested by you . Kindly confirm.
7. Certificate does not bear your signature/Rubber Stamp/Diagnosis.
8. Signature/TT of the IP appearing in the top of certificate is not attested by you.
9. Certificate does not bear double carbon impression.
10. The Name and Insurance Number does not tally.
11. The certificate under reference is not traceable at this end. Kindly issue a duplicate certificate.
12. There is a correction in the ..... Kindly confirm.
13. The fit date in the CC/ Fit certificate under reference is..... which is 4th day from the date of issue and hence is irregular. Kindly confirm the date of fitness.
14. The last certificate submitted by the IP was the first /intermediate certificate issued on ..... As such, the interval between the two certificates exceeds 7 days. As laid down under Regulation 59, it may kindly be indicated whether PR or PNR for the period from .....to.....
15. The Medical Referee has confirmed the diagnosis as ..... but the Diagnosis furnished in the certificate under reference is .....Kindly Confirm whether these two diagnosis are one and the same.

Yours faithfully,

BRANCH MANAGER